PET BOARDING & DAYCARE SUPPLEMENTAL

Covers boarding kennels, dog daycares, and pet resorts, including facilities that also train or groom. In-home pet sitting and dog walking use CWCO-SUP-PETSIT; grooming-only businesses CWCO-SUP-PETGROOM. Complete with ACORD 125, 126, and 140. Attach the vaccination policy and the emergency and evacuation plan.

1 APPLICANT / BUSINESS INFORMATION

LEGAL BUSINESS NAME | DBA / FACILITY NAME | FEIN | YEARS IN BUSINESS

FACILITY ADDRESS | CITY / STATE / ZIP | WEBSITE / BOOKING PAGE

Entity type:

☐ Sole proprietor ☐ Partnership ☐ LLC ☐ Corporation ☐ Franchise

PRIMARY CONTACT / TITLE | PHONE | EMAIL

STATE KENNEL / BOARDING LICENSE NO. (IF REQUIRED) | DATE OF LAST STATE INSPECTION

2 OPERATIONS

SERVICE	% OF ANNUAL REVENUE

Services: overnight boarding; daycare and group play; training (including board-and-train); grooming and bathing; pet taxi; retail; cat boarding; exotic or small-animal boarding; other.

MAXIMUM ANIMALS OVERNIGHT | MAXIMUM DOGS IN DAYCARE PER DAY | INDOOR SQ. FT. | YEAR BUILDING CONSTRUCTED

2-1 Does the facility transport animals (pet taxi, pickup and drop-off)? ☐ Yes ☐ No

IF YES, EXPLAIN

2-2 Does the facility board animals other than dogs and cats? ☐ Yes ☐ No

IF YES, EXPLAIN

2-3 Is the facility located in or attached to the owner's residence? ☐ Yes ☐ No

IF YES, EXPLAIN

3 EXPOSURE & RISK QUESTIONS — FIRE & OVERNIGHT SAFETY

Overnight kennel fires with no one on site have killed every animal in the building — 18 dogs in Minnesota and about 30 each in Illinois and Michigan. In several, smoke detectors sounded with no one there to hear them.

3-1 Is a staff member awake and on site whenever animals are boarded overnight? ☐ Yes ☐ No
IF YES, EXPLAIN

3-2 Is smoke and heat detection monitored by a central station that calls the fire department and an on-call person? ☐ Yes ☐ No
IF YES, EXPLAIN

3-3 Does the building have automatic sprinklers? ☐ Yes ☐ No
IF YES, EXPLAIN

3-4 Are space heaters and heat lamps prohibited in animal areas? ☐ Yes ☐ No
IF YES, EXPLAIN

3-5 Is there a written evacuation plan, with leashes and carriers staged near exits and a relocation site identified? ☐ Yes ☐ No
IF YES, EXPLAIN

3-6 Has the electrical system been inspected by a licensed electrician in the last 3 years? ☐ Yes ☐ No
IF YES, EXPLAIN

3-7 Has the facility had a fire, smoke incident, or power failure affecting animals? ☐ Yes ☐ No
IF YES, EXPLAIN

4 EXPOSURE & RISK QUESTIONS — GROUP PLAY, BITES & ESCAPES

4-1 Does every new dog pass a temperament evaluation before joining group play? ☐ Yes ☐ No
IF YES, EXPLAIN

DOGS PER STAFF MEMBER IN PLAYGROUPS (MAX)

PLAYGROUPS SEPARATED BY SIZE? (Y / N)

4-2 Is every fight, bite, and injury written up the same day? ☐ Yes ☐ No
IF YES, EXPLAIN

4-3 Is the owner notified the same day of any fight, bite, or injury involving their pet? ☐ Yes ☐ No
IF YES, EXPLAIN

4-4 Do all entrances to animal areas have double gates or an airlock? ☐ Yes ☐ No
IF YES, EXPLAIN

4-5 Are perimeter fences checked daily for gaps and digging? ☐ Yes ☐ No
IF YES, EXPLAIN

4-6 Has an animal been seriously injured, killed, or lost while in the facility's care? ☐ Yes ☐ No
IF YES, EXPLAIN

4-7 Has a customer or employee been bitten badly enough to need medical care? ☐ Yes ☐ No
IF YES, EXPLAIN

5 EXPOSURE & RISK QUESTIONS — HEALTH, VACCINATION & HEAT

5-1 Is proof of current rabies, distemper/parvo, and Bordetella vaccination required for every dog? ☐ Yes ☐ No
IF YES, EXPLAIN

5-2 Is canine influenza vaccination required? ☐ Yes ☐ No
IF YES, EXPLAIN

5-3 Is there a separate isolation area for animals that show signs of illness? ☐ Yes ☐ No
IF YES, EXPLAIN

5-4 Is there a written plan for notifying owners during a respiratory or other disease outbreak? ☐ Yes ☐ No
IF YES, EXPLAIN

5-5 Do owners sign an authorization for emergency veterinary care at check-in? ☐ Yes ☐ No
IF YES, EXPLAIN

5-6 Is a veterinarian or emergency clinic on call whenever animals are on site? ☐ Yes ☐ No
IF YES, EXPLAIN

5-7 Do outdoor play areas have shade and fresh water available at all times? ☐ Yes ☐ No
IF YES, EXPLAIN

5-8 Is outdoor play limited or stopped at set heat-index thresholds? ☐ Yes ☐ No
IF YES, EXPLAIN

5-9 Has a state inspection found violations in the last 3 years? ☐ Yes ☐ No
IF YES, EXPLAIN

6 PAYROLL, SALES & REVENUE

TOTAL ANNUAL PAYROLL ($)	NUMBER OF EMPLOYEES	ANNUAL BOARDING NIGHTS

PROJECTED ANNUAL GROSS REVENUE ($)	PRIOR YEAR ACTUAL REVENUE ($)	DAYCARE REVENUE ($)

7 PRIOR INSURANCE & LOSS HISTORY

Attach currently valued loss runs for the last 5 years.

CURRENT PROPERTY / GL CARRIER	ANIMAL BAILEE (CARE, CUSTODY & CONTROL) LIMIT	PER-ANIMAL SUBLIMIT

7-1 Has any carrier declined, cancelled, or non-renewed coverage for this operation in the last 5 years? ☐ Yes ☐ No
IF YES, EXPLAIN

DATE OF LOSS	DESCRIPTION	TOTAL INCURRED ($)	OPEN / CLOSED

7-2 Is the applicant aware of any incident, complaint, or circumstance not yet resulting in a claim that could reasonably give rise to one? ☐ Yes ☐ No
IF YES, EXPLAIN

8 RISK MANAGEMENT & SAFETY

8-1 Do owners sign a boarding agreement that covers vaccination, group play, emergency care, and limits of liability? ☐ Yes ☐ No

IF YES, EXPLAIN

8-2 Are staff trained in dog body language, fight interruption, and pet first aid? ☐ Yes ☐ No

IF YES, EXPLAIN

9 SIGNATURE & FRAUD WARNING

The undersigned declares that the statements and answers given in this supplemental are true, complete and correct to the best of their knowledge, and that no material fact has been withheld or misstated. The applicant agrees that this supplemental, together with all ACORD applications and attachments, forms the basis of any submission to insurers and may be relied upon by them. Signing this supplemental does not bind coverage. This supplemental is an intake document prepared by Cory Washington & Co. LLC to support carrier submission; it does not itself provide coverage.

FRAUD NOTICE: Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance containing any materially false information, or conceals for the purpose of misleading information concerning any fact material thereto, commits a fraudulent insurance act, which is a crime and subjects such person to criminal and civil penalties. (State-specific fraud warnings apply; see state amendatory notice.)

APPLICANT / AUTHORIZED SIGNATURE (TYPE FULL NAME)	TITLE	DATE

PRODUCER — CORY WASHINGTON & CO. LLC	PRODUCER SIGNATURE (TYPE FULL NAME)	DATE